

# Jefferson County Health Department



2012  
Annual Report



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# Jefferson County Health Department Staff



## **First Row:**

Serena Jahnke-Berg, RN, BSN, Public Health Nurse; Gail Scott, RN, BSN, Director/Health Officer  
Kathy Cheek, RN, BSN, Public Health Nurse; Sandee Schunk, Accounting Specialist II & WI Well Woman Program Coordinator  
Marsha Hake, RN, BSN, Public Health Nurse; Sally Albertz, Administrative Assistant II (Public Health)  
Jackie Behm, RN, BSN, Public Health Nurse

## **Second Row:**

Vicki Gallardo, RDT, WIC Dietetic Technician; Mary Wollet, RD, WIC Project Director Supervisor  
Patty Pohlman, Administrative Assistant II (WIC & PCW); Amy Fairfield, RN, BSN, Public Health Nurse  
Sarah Born, RN, BSN, Public Health Nurse; Michele Schmidt, Administrative Assistant II (PCW)  
Shirley Gehrke, LPN, Public Health Technician; Diane Nelson, MSN, RN, Public Health Program Manager

**Below:** Bonnie Peot, LPN, Rock River Free Clinic; Mary Stearns, RN, BSN, Public Health Nurse





**Pictured at left:**  
**Breastfeeding Peer Support Counselors**  
Amanda Zammit & Socorro Olson  
Amanda Zammit and her baby

**Pictured below right:**  
**Jail Health Program Nurses**



**Pictured above:**  
Jefferson County Environmental Health Consortium Staff - Marc Schultz, Registered Sanitarian;  
Holly Hisel, Environmental Health Technician and Erin O'Brien, Registered Sanitarian

**Not included in pictures:** Contracted Interpreters, Part Time Jail Health Technicians

# Board of Health & Staff

## Board of Health

Ed Morse, Chair, Dick Schultz, Vice-Chair, Marie Wiesmann, RN, BSN, Secretary  
John McKenzie, Don Williams, MD

## Director/Health Officer

Gail M. Scott, RN, BSN

## Public Health Program Manager

Diane Nelson, MSN, RN, Public Health Program Manager

### Clerical Support Staff

Sandee Schunk  
Accounting Specialist II  
Wisconsin Well  
Woman Program Coordinator

Sally Albertz  
Administrative Assistant II

### Environmental Health Consortium

Erin O'Brien, RS\*  
Registered Sanitarian  
Holly Hisel, Technician\*  
Environmental Health Specialist

Marc Schultz, RS\*  
Registered Sanitarian

### Interpreters

Paul Camacho  
Mary Hernandez  
Cecilia Lentz  
Kim Lopez  
Maria Sonia Muniz  
Elizabeth Pizano  
Carmen Roahen  
Dan Roahen  
Juanita Villalobos

### Jail Staff

#### Public Health Nurse (Jail)

Tania Wenzel, RN, BSN

#### Public Health Techs (Jail)

Diane Lenz, LPN  
Sarah Luebke, LPN  
Melissa Goodearle, LPN  
Terry Nelson, LPN  
Courtney Beitz, LPN

#### Personal Care Program

Michele Schmidt  
Administrative Assistant II  
Patty Pohlman  
Administrative Assistant II  
(part-time)

### Public Health Nurses

Jackie Behm, RN, BSN  
Serena Jahnke-Berg, RN, BSN  
Sarah Born, RN, BSN  
Kathy Cheek, RN, BSN  
Amy Fairfield, RN, BSN  
Mary Stearns, RN, BSN

### Public Health Tech

Shirley Gehrke, LPN  
Office/Clinic

### Clinic LPN

Bonnie Peot, LPN  
Rock River Free Clinic

### Public Health Preparedness Program

Gail Scott, RN, BSN  
Local Coordinator  
Alex Lichtenstein\*\*  
Consultant

### WIC Program Staff

Mary Wollet, RD  
WIC Project Director Supervisor  
Vicki Gallardo, RDT  
WIC Registered Dietetic Tech  
Marsha Hake, RN, BSN  
Public Health Nurse  
Patty Pohlman  
Administrative Assistant II  
M. Socorro Olson  
WIC Breastfeeding Peer  
Support Counselor  
Kristin Schneider  
WIC Breastfeeding Peer  
Support Counselor  
Amanda Zammit  
WIC Breastfeeding Peer  
Support Counselor

\* = Partnership with Watertown Department of Public Health

\*\* = Partnership with Dodge County Human Services and Health Department  
and Watertown Department of Public Health

# Health Department Mission Statement

**The mission of Jefferson County Health Department is to protect and promote health for all citizens of Jefferson County through the primary prevention of disease, disability and death.**

## **The mission is accomplished by:**

- ❖ Providing community leadership and active membership in partnerships
- ❖ *Supporting the primary Public Health functions - assessment, policy development and assurance*
- ❖ Creating policies and plans that support individual and community health efforts
- ❖ *Preventing morbidity and mortality from communicable and chronic diseases*
- ❖ Providing educational opportunities for students
- ❖ *Enforcing and complying with local, state and federal laws*
- ❖ Promoting and ensuring healthy environments
- ❖ *Assuring Public Health preparedness and emergency response*
- ❖ Educating the public about healthy lifestyles
- ❖ *Providing direct services to identified populations*
- ❖ Linking people to needed health services and available resources
- ❖ *Compiling and analyzing data to monitor the health status of the community*
- ❖ Collaborating with hospitals and community organizations to produce a Community Health Assessment and a Community Health Improvement Plan
- ❖ *Maintaining an experienced and competent workforce of health professionals*

# 2012 Health Department Budget

Program	Funding Source	Revenue	Expenditures
Adult Immunization Coalition	Interstate Postgraduate Medical Association	\$10,000.00	\$6,601.90
Childhood Lead Poisoning Prevention Grant	Federal Grant General Tax Levy	\$6,665.00	\$7,492.37
Environmental Health	General Tax Levy	\$0	\$31,839.10
Rock River Free Clinic LPN	Rock River Free Clinic	\$40,879.46	\$40,879.46
Head Start Nursing	Head Start Program	\$4,281.56	\$4,281.56
Immunization Grant	Federal Grant General Tax Levy	\$14,764.00	\$32,188.46
Maternal & Child Health Grant	Federal Grant General Tax Levy	\$23,292.00	\$153,547.31
Mental Health Nursing	Human Services	\$15,351.43	\$15,351.43
Personal Care (**WIMCR = Wisconsin Medicaid Cost Reporting)	Medical Assistance, Private Pay, COP, Elderly Services, Veteran's Administration, Care WI, Inc., WIMCR**	\$1,058,547.43	\$968,464.53
Public Health	Fee for Service, Donations General Tax Levy	\$91,766.55	\$760,690.33
Public Health Preparedness Grant (4631)	Centers for Disease Control	\$33,991.00	\$19,851.20
Public Health Preparedness Grant (4635)	Center for Disease Control	\$26,441.00	\$43,352.70
Tuberculosis Dispensary	Wisconsin TB Program	\$1,150.13	\$154.17
WIC Breastfeeding Peer Counseling	Federal WIC Grant	\$12,474.00	\$12,471.43
WIC Grant	Federal WIC Grant, State GPR	\$326,411.00	\$326,410.52
Wisconsin Well Woman	Federal Grant General Tax Levy	\$22,406.00	\$24,646.62
Transfer from County Contingency Fund	County Payroll Adjustment	\$23,151.10	\$0
	2012 General Tax Levy	\$970,621.00	\$0
<b>Total</b>		<b>\$2,682,192.66</b>	<b>\$2,448,223.09</b>
<b>2012 Surplus</b>		<b>\$233,969.57</b>	



# Personal Care Program

## Personal Care Services include:

- ❖ Assistance with bathing, hair and skin care, dressing and toileting
- ❖ Mobility and transfers including use of walker, cane or crutches
- ❖ Housekeeping tasks and washing the client's bed linens and clothing
- ❖ Meal preparation, food purchasing
- ❖ Reminding the client to take pre-selected medications
- ❖ Accompanying the client to obtain medical diagnosis and treatment
- ❖ Incidental/minimal care of client's pet
- ❖ Connecting the client to community resources

In 2012, Care Wisconsin, Inc. continued to contract with Jefferson County Health Department for a Personal Care Program Assistant who acts as a liaison for services provided by contracted staffing agencies. The Program Assistant also coordinates services for clients who are funded through private pay, the Elderly Services Block Grant, on the waiting list or who have not chosen Care Wisconsin, Inc. The Program Assistant is on-call 24/7 for any scheduling or patient problems.

Personal Care Program Statistics	2010	2011	2012
Personal Care Admissions	66	53	56
Personal Care Discharges	81	59	60
Personal Care Registered Nurse/LPN Visits	276	169	182
CBRF Hours*	2,615	592	0
CBRF Clients	10	3	0
St. Coletta Hours*	12,387	10,986	10,818
St. Coletta Clients	25	15	15
Medical Assistance Card Hours*	11,184	8,118	8,410
Medical Assistance Clients	18	11	9
Elderly Service Hours*	2,597	2,301	2,687
Elderly Service Clients	44	31	30
Private Pay Hours*	1,730	820	2,135
Private Pay Clients	31	15	16
COP Hours*	443	362	402
COP Average Monthly Clients	7	5	5
Care Wisconsin Hours*	38,808	28,248	28,716
Care Wisconsin Clients	106	79	74
Total Personal Care Hours*	69,764	51,427	53,168

# Jefferson County Environmental Health Consortium

Partnership with Jefferson County Health Department & City of Watertown Department of Public Health

Well inspections	29
Bacteria initial samples	152
Follow up bacteria samples	0
Raw water bacteria samples	3
Bi-monthly samples	8
Nitrate initial samples	154
Nitrite samples (new wells only)	2
Beach Water Sampling (3 beaches)	39
Radon Test kits distributed	600
Radon kits sent to Alpha Energy for testing	310
Radon Media releases/displays at shows/presentations to groups	15
Health Hazard Complaints - Watertown & Jefferson County	52

## 2012 DHS Agent Facility Inspections

DHS Facility Type	Pre-Inspections	Inspections	Re-Inspections	Onsite Visit	Complaint Follow-ups	Total
Restaurant	1	15	1	1	1	19
Restaurant Low	1	29	1	4	0	35
Restaurant Medium	51	245	53	47	12	408
Restaurant Complex	21	48	18	15	5	107
Temporary Food	0	67	0	35	1	103
Lodging	3	38	0	0	1	42
Pools/Whirlpools	3	41	9	36	0	89
Campgrounds	1	16	0	2	0	19
Rec Ed Camps	0	5	0	0	0	5
Schools	0	89	0	4	0	93
Tattoo/Piercing	1	4	0	0	0	5
Special Event Campground	0	6	0	0	0	6
<b>Total</b>	<b>82</b>	<b>603</b>	<b>82</b>	<b>144</b>	<b>20</b>	<b>931</b>

## 2012 DATCP Agent Facility Inspections

DATCP Facility Type	Pre-Inspections	Inspections	Re-Inspections	Enforcements	Complaint Follow-Up	Total
Large Potentially Hazardous	3	27	3	18	4	55
Small Potentially Hazardous	9	53	7	10	4	83
Large Non-Potentially Hazardous	6	19	1	1	0	27
Very Small Non-Potentially Hazardous	2	11	0	1	0	14
Very Small Potentially Hazardous	7	24	1	3	0	35
Not Engaged in Food Processing	0	24	0	3	0	27
Traveling/Mobile	0	48	0	2	1	51
<b>Total</b>	<b>27</b>	<b>206</b>	<b>12</b>	<b>38</b>	<b>9</b>	<b>292</b>

# Public Health Program Statistics

Program or Service	2012
Car Safety Seat Inspections/Installations	146
Communicable Disease Investigations	618
County Jail Client Visits	4,222
Dental Fluoride Supplement Clients	76
Dental Fluoride Varnish Clients	51
EH – Beach Water Samples	39
EH – Dept. of Ag Agent Facility Inspections	292
EH – Dept. of Health Agent Facility Inspections	931
EH - Environmental Health Complaints	52
EH - Transient Well Water Samples	309
Health Education Attendees/Sessions	521/39
Hearing & Vision Screening	1,118
Immunization Clients	2,038
Immunizations Given	3,855
Lead Early Intervention Contacts	258
Lead Level Screenings	753
Lead Level ( $\geq 10\mu\text{g/dL}$ ) (elevated)	8
Mental Health Client Visits	707
Office Clients	601
Paternity Tests	275
PHN Well Water Samples	88
Pregnancy Tests	96
Public Health Nurse Contacts	4,787
Well Child/HealthCheck Clinic Clients	289
WI Well Woman Program Enrolled or Re-Enrolled	139
WIC Breastfeeding Peer Support Visits	1,041
WIC Monthly Caseload Average	1,556

# 2012 Communicable Disease Investigations

Category	Disease Subcategory	Confirmed	Probable	Suspect	Not a Case	Total
Category I	<b>*Haemophilus Influenzae Invasive Disease</b>	1	0	0	2	3
	<b>*Hepatitis A</b>	0	0	0	4	4
	<b>*Pertussis (Whooping Cough)</b>	38	4	11	193	246
	<b>Tuberculosis</b>	0	0	0	5	5
Category II	<b>Arboviral Disease (tick or mosquito)</b>	0	0	0	2	2
	<b>Babesiosis (tick)</b>	1	0	0	0	1
	<b>Blastomycosis (fungal infection)</b>	2	0	0	0	2
	<b>Campylobacteriosis (GI disease)</b>	25	0	0	0	25
	<b>Chlamydia Trachomatis Infection (STD)</b>	145	0	0	2	147
	<b>Cryptosporidiosis (GI disease)</b>	5	0	0	0	5
	<b>E-Coli, Shiga Toxin Producing (STEC) (GI disease)</b>	6	0	0	1	7
	<b>Ehrlichiosis/Anaplasmosis (tick)</b>	0	0	0	1	1
	<b>Giardiasis (GI disease)</b>	4	0	0	0	4
	<b>Gonorrhea (STD)</b>	9	0	0	3	12
	<b>*Hepatitis B</b>	1	4	0	5	10
	<b>Hepatitis C</b>	15	6	0	0	21
	<b>Hepatitis E</b>	0	0	0	1	1
	<b>Histoplasmosis (fungal infection)</b>	1	0	0	0	1
	<b>*Influenza</b>	13	0	0	0	13
	<b>Invasive Streptococcal Disease A &amp; B</b>	9	0	0	4	13
	<b>Lyme Disease (tick)</b>	4	1	3	8	16
	<b>*Mumps</b>	0	0	0	2	2
	<b>Mycobacterial Disease (Nontuberculosis)</b>	5	0	0	0	5
	<b>Salmonellosis (GI disease)</b>	8	0	0	0	8
	<b>Shigellosis (GI disease)</b>	1	0	0	0	1
	<b>Streptococcus Pneumoniae Invasive Disease</b>	3	0	0	0	3
	<b>Syphilis (STD)</b>	0	0	1	1	2
	<b>*Varicella (Chickenpox)</b>	4	0	0	2	6
	<b>Yersiniosis (GI disease)</b>	1	0	1	0	2
	<b>AFB Smear Positive</b>	0	0	0	1	1
	<b>Norovirus (GI disease)</b>	11	0	0	0	11
Not reportable	<b>Not Reportable</b>	0	0	0	1	1
	<b>Parapertussis</b>	0	0	0	28	28
	<b>Streptococcal Infection Other Invasive</b>	1	0	0	0	1
	<b>Tuberculosis Latent Infection</b>	6	0	1	1	8
<b>Total</b>		<b>319</b>	<b>15</b>	<b>17</b>	<b>267</b>	<b>618</b>

GI = Gastrointestinal Disease, STD = Sexually Transmitted Disease

\*Vaccine Preventable Disease



# 2012 Vaccine Usage Report

Vaccine	Total	Vaccine	Total
Diphtheria-Tetanus-Pertussis	62	Influenza (Injectable)	960
Diphtheria-Tetanus-Pertussis-Hep B-Polio	10	Influenza (Intradermal)	62
Diphtheria-Tetanus-Pertussis-Hib-Polio	124	Meningococcal	173
Diphtheria-Tetanus-Pertussis-Polio	107	Measles-Mumps-Rubella	191
Hepatitis A	178	Pneumococcal-Poly (Adult)	19
Hepatitis A – Hepatitis B	150	Pneumococcal (Child)	184
Hepatitis B	141	Polio	31
Haemophilus Influenza type B (Hib)	56	Rotavirus	76
Human Papilloma Virus (HPV)	242	Tetanus-Diphtheria-Pertussis	548
Influenza (Nasal)	296	Varicella (Chickenpox)	245
<b>Total Vaccines Given</b>			<b>3,855</b>
<b>Total Clients</b>			<b>2,038</b>

## Jefferson County Immunization Coalition

Since its inception in the fall of 2009, the Jefferson County Immunization Coalition has worked to keep medical providers in Jefferson County informed of the most current vaccine recommendations.

The Coalition's ultimate goal is to protect the community from vaccine-preventable diseases. This is even more important now that the Centers for Disease Control and Prevention has changed its policy on how vaccine that is funded through the 317 program can be used. As of October 1, 2012, Public Health Departments will no longer be able to provide state-supplied vaccine to anyone who has insurance coverage for vaccines, even if the policy has a co-pay, deductible or the deductible has not been met.

The Health Department will still be able to provide vaccine to children with no insurance coverage and children on Medicaid, as vaccines for these populations are funded by the Vaccines for Children (VFC) program. Tdap, DTaP & Influenza vaccine will be provided to children regardless of insurance status.

The Health Department secured an *Interstate Postgraduate Medical Association* grant for funding to educate the medical community on the importance of appropriately vaccinating their patients. A symposium with a nationally known speaker, Dr. Gregory Poland from Mayo Clinic, will be held in early 2013.

Amy and Sarah,  
 "You are two of my favorite nurses! I truly believe you have more than just the nugget of an Immunization Coalition – how do we keep the conversation going and what can I do to help? I would be happy to come back. You all are great and I love the energy!"

Dr. Gregory Poland  
 Mayo Clinic

# Public Health Programs and Services

## Access to Care

- ❖ Partnerships with: Community Dental Clinic, Rock River Free Clinic
- ❖ Wisconsin Well Woman Program
- ❖ Assist individuals and families in obtaining Medical Assistance

## Communicable Disease Control

- ❖ Communicable disease case management & prevention education
- ❖ Education & resource for medical providers & vaccine distribution
- ❖ Immunization Program & Wisconsin Immunization Registry (WIR)
- ❖ Rabies prevention & control
- ❖ Response to food, water or disease outbreaks
- ❖ Tuberculosis case management & Dispensary
- ❖ Wisconsin Electronic Disease Surveillance System (WEDSS)

## Community Health Assessment

- ❖ Community Health Assessment completed every five years
- ❖ Community Health Improvement Plan developed from Assessment
- ❖ Analysis of County Health Rankings
- ❖ Provision & analysis of health related data

## Community Health Education

- ❖ Information to community partners & at health fairs
- ❖ Health education, press releases to media & radio interviews
- ❖ Health Department Website & Facebook Page
- ❖ Public Information Officer during disasters or outbreaks

## Correctional Health Program

- ❖ Clinical Nursing Services in the Jail & Court
- ❖ Collecting samples for Paternity Testing
- ❖ Education of staff & inmates
- ❖ Infection control resource & provision of vaccinations

## Education of Students

- ❖ School Nursing & screening services
- ❖ Student Clinical placement site for students

## Environmental Health Program

- ❖ Agent of the State for Department of Agriculture
- ❖ Agent of the State for Department of Health Services
- ❖ Beach water sampling & weekly pool water testing
- ❖ Disaster, chemical hazards & spill response
- ❖ Follow-up on human health hazard complaints
- ❖ Indoor air quality, asbestos, radon & lead education
- ❖ Pharmaceutical Clean Sweep
- ❖ Transient well water sampling & inspections

# Public Health Programs and Services

## Healthy Lifestyles

- ❖ Community Supported Agriculture
- ❖ Farm to School initiatives
- ❖ Wellness Committees in County communities

## Maternal & Child Health

- ❖ Car seat safety & education program
- ❖ Childhood Lead Poisoning Prevention Program
- ❖ Children & Youth with Special Health Care Needs
- ❖ Dental Varnish & Fluoride Program
- ❖ Head Start Nursing consultation
- ❖ Home Visiting & Parenting Partnership
- ❖ Newborn Family Services
- ❖ Prenatal Care Coordination
- ❖ Pregnancy & paternity testing
- ❖ Well Child Clinics
- ❖ Woman, Infants & Children Program (WIC)

## Mental Health Nursing Services

- ❖ Community Support Program & medication management

## Public Health Preparedness/Disaster Response

- ❖ 24/7 On-Call and emergency/disaster response
- ❖ Business Continuity of Operations Plan
- ❖ Capabilities Assessment completed
- ❖ Communications training & exercises
- ❖ Disaster, Pandemic Influenza & Mass Clinic exercises & planning
- ❖ Emergency/disaster communication with local & regional media, medical providers, EMS, Police, Fire, County & local government
- ❖ Member of the Local Emergency Planning Committee
- ❖ PCA Portal, E-Sponder & Epi-X
- ❖ Health Department & County Emergency Operations Plan
- ❖ Partnerships and planning with Fort HealthCare, Jefferson County Emergency Management, Dodge County Human Services & Health Department, City of Watertown Department of Public Health
- ❖ Preparedness training for staff & management
- ❖ Provision of resources for other County departments
- ❖ Southern Region Public Health Preparedness planning & exercises
- ❖ Special Needs Populations disaster response planning
- ❖ Voluntary Organizations Active in Disasters (VOAD)

## Tobacco Prevention & Control Program

- ❖ Education about other tobacco products
- ❖ Wisconsin Tobacco Quit Line & FAX to Quit
- ❖ Tobacco Free Partnership – Dodge, Jefferson & Waukesha

# 2012 New Programs

## Cribs for Kids – Safe Sleep

Jefferson County Health Department is committed to the reduction of infant mortality. Providing a safe place for infants to sleep is one strategy to reduce infant deaths related to an unsafe sleeping environment. The Cribs for Kids program provides a safe place for infants to sleep by providing a Pack N Play® portable crib to families in need. Education on safe sleep and other Sudden Infant Death Syndrome (SIDS) reduction strategies is an important part of the Cribs for Kids program.



In 2012, the Jefferson County Child Death Review Team (CDRT) identified a need for promotion of a safe sleep environment for infants and children. The Health Department applied for a National Cribs for Kids grant that was accepted but not funded.

The Health Department was contacted by Molina Healthcare who offered to assist the Health Department in program development. It was decided that the greatest need was for cribs. Molina staff donated 20 Pack N Plays® and safe sleep kits worth \$1,500.

Health Department administration and staff developed policies, procedures and forms for the program. The Public Health Nurses and WIC staff identify families needing the cribs and provide education on safe sleep practices and the use of the Pack N Plays®.

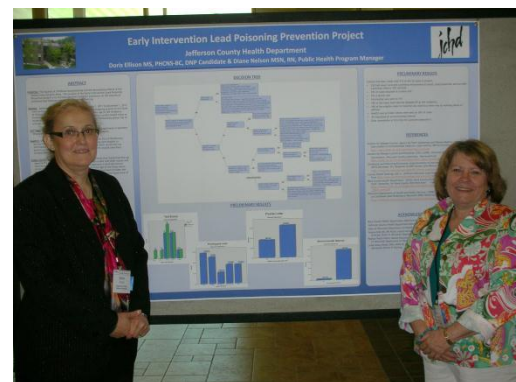
## Early Intervention Lead Poisoning Prevention Program

Jefferson County Health Department was the site of the Early Intervention Lead Poisoning Prevention Program, conducted by Doris Ellison a University of Minnesota Post Masters-



Doctorate of Nursing Practice student. The assessment, implementation and evaluation of the program were partial fulfillment of her degree. The Early Intervention Lead Poisoning Prevention Program was modeled after an existing program in Rock County, Wisconsin. The purpose of the program was to provide parents/caregivers of at-risk children information on the risks of lead exposure, strategies to mitigate the problem, empowerment to reduce the child's risk of lead poisoning and awareness on the importance of blood lead testing.

The program provided a targeted intervention approach and was conducted from January 2012 through December 2012. Families with children born between June 1, 2011 and December 1, 2011 were assessed using birth records and Geographic Information Systems mapping. Children residing at addresses with pre-1950 housing were identified as being at-risk for elevated blood lead levels based on the age of dwelling construction where they resided. Fifty-one children qualified to participate in the project. Statistical findings of the program were insignificant; however, several implications for an early intervention, targeted approach emerged.



Results of the project have been disseminated at the Wisconsin Public Health Nursing Conference, Wisconsin Public Health Association Lunch & Learn and the State of Wisconsin Implementation and Oversight Committee for Childhood Lead Poisoning elimination. Pictured above are Doris Ellison and Diane Nelson, Public Health Program Manager, at the Wisconsin PHN Conference.



# Program Updates

## Child Death Review Team

### Goals

- ❖ Improve our understanding of how and why children die.
- ❖ Identify the need to influence policies and programs.
- ❖ Improve child health, safety, and protection.
- ❖ Prevent other child deaths.

### Objectives

- ❖ Accurate identification and uniform reporting of cause, manner and relevant circumstances of every child death with special emphasis on prevention.
- ❖ Improved communication and coordination of agency responses to child deaths in the investigation and delivery of services.
- ❖ Design and implementation of cooperative, standardized guidelines for the investigation of certain categories of child death.
- ❖ Identification of changes needed in legislation, policy and practices, to expand efforts in child health and safety that prevent child deaths.



As part of the systems building Consolidated Contract Maternal and Child Health objective Jefferson County Health Department agreed to investigate and assess the need for a Child Death Review Team (CDRT) in the County. The goal of the CDRT is to understand how and why children die and to improve child health, safety and protection to prevent similar children's deaths. Participation as a team member represents a commitment to eliminating obstacles, integrating community responses to child deaths and creating opportunities for prevention.

CDRTs are multi-disciplinary teams focused on childhood injury and death prevention. County team members include: Coroner, law enforcement, Public Health, Human Services (Mental Health and Child Protective Services), school districts, hospital and emergency room staff, EMS, District Attorney and others as determined by the team. Each team member brings a valuable perspective to the review meeting. Unlike a death certificate a multi-disciplinary team provides a comprehensive picture of the risk factors and circumstances surrounding the death of a child.

*Diane,  
"Thank you very much for your presentation to the Community Coordinated Response Team (CCRT) on the Child Death Review Team process. I thought it would be helpful to them in understanding how a similar process might work for them and be beneficial. It sounds like your presentation did just that!"*

*Thanks, Kathy Eisenmann  
UW-Extension*

In 2012, the CDRT met four times and reviewed the circumstances surrounding the deaths of eleven children. Not losing sight of the mission statement and purpose of understanding and preventing other children's deaths, in 2013 the team plans to review common themes in the cases that were reviewed. The CDRT intends to make recommendations to catalyze community actions with the message of prevention. A safe sleep environment and the co-morbidities of alcohol and other drug addictions are categories that have risen to the top and will most likely be priority areas for targeted recommendations.

# Car Seat Grant – Keeping Kids Safe

The Health Department received a State Department of Transportation, Bureau of Transportation Safety Car Seat Grant for the purchase and proper installation of car seats for eligible families. The Health Department has three certified National Highway



**"The Public Health Nurse (Mary Stearns) who came to see me was very helpful and nice. I feel so much better knowing I can call her anytime with questions I may have."**

**Katelyn, Prenatal Care Coordination (PNCC) client**

Transportation Safety Administration (NHTSA) Car Safety Seat Technicians, Mary Stearns, Marsha Hake and Vicki Gallardo, who carefully match the car seat to the child, properly install the seat and teach the parents how to properly install and use the seats. A total of 146 car safety seat checks were done in 2012.

## Wellness Programs

Chronic diseases are among the most common and costly of all health problems in the United States, but they also are among the most preventable. Lack of physical activity and poor nutrition—two modifiable risk factors for obesity—and tobacco use are responsible for much of the illness, suffering, and death related to chronic diseases. Jefferson County Health Department staff have teamed up with Fort HealthCare in communities throughout Jefferson County to promote healthy living and to provide education and support on improving health and prevention of chronic disease.

## Parenting Partnership

Jefferson County Public Health Nurses are trained in a variety of evidenced based parenting programs with the goal of assisting and supporting families. One of the programs they use is the American Academy of Pediatrics *"Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents"*.

Topics covered include: family support, child growth and development, mental health, nutrition, healthy weight, physical activity, oral health, community relationships, education on and referral to community resources, safety and injury prevention and the importance of vaccines.



The Public Health Nurses also offer an assessment of growth and development including the use of growth charts to track growth patterns. The nurses work closely with other community resources, including medical providers, schools, Human Services and community organizations.

# What About WIC?

Jefferson County Health Department offers the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) to promote and maintain the health and well-being of nutritionally at-risk pregnant, breastfeeding and postpartum women and infants and children.

WIC provides supplemental nutritious foods, nutrition and breastfeeding information and referral to other health and nutrition services.

WIC promotes and supports breastfeeding and has Breastfeeding Peer Support Counselors and Certified Lactation Consultants available.

The WIC staff work closely with the Public Health Nurses to assist in prenatal care coordination and post-partum follow-up.

*"In 2012, 2,650 individuals received services from the Jefferson County WIC program. A total of \$952,062 worth of WIC vouchers were redeemed at local grocery stores. The WIC staff does a phenomenal job at supporting women, infants and children and promoting healthy lifestyles and positive pregnancy outcomes."*

**Gail Scott, RN, BSN**  
Director/Health Officer

## Prenatal Care Coordination – Healthy Births

Public Health Nurses provide services to pregnant women and their families to promote a healthy pregnancy and birth and to prevent premature births and low birth weight babies. Home visits are offered before and after the baby is born to provide education and support including health insurance options, access to a medical provider, nutrition and food sources, testing private well water and education about newborn cares and parenting. Referrals are provided to local and state resources.



*"I have been working with Serena since I started at the Department in August. Serena has the warmest personality and is so genuine in her interactions with others."*

*She is a wealth of knowledge and is more than willing to go above and beyond to meet the needs of this family. Serena is innovative in her ideas and advocates for suggestions that empower the parents and build upon their strengths and natural supports to keep their child healthy. Serena has a way of engaging with folks so sincerely that she is able to both share and acquire great information that is critical to child safety and family well-being."*

*Serena's communication skills are unmatched and she makes sure that everyone who works on the inter-disciplinary team of professionals on this case is kept up to date, especially the doctors (and there are a lot of those!). It has truly been a wonderful experience working with her."*

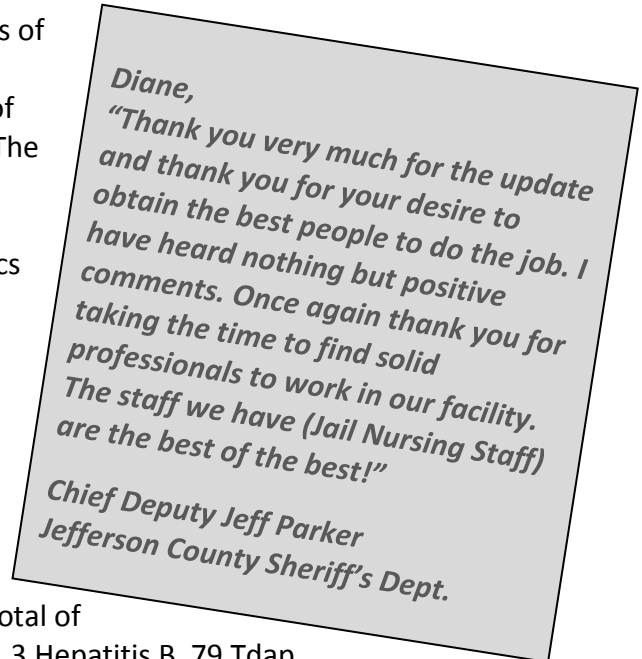
**Brittany Krumbeck**  
CPS Ongoing Case Manager, Jefferson County Human Services

# Vaccine for Jail Inmates

Jefferson County Health Department provides nursing services at the Jefferson County Jail. Initial discussions started in the spring of 2011 regarding offering Hepatitis immunizations to the high risk population residing at the Jail. The State of Wisconsin Immunization Program recognizes this population as high risk and continues to provide Hepatitis and Tdap vaccines at no cost for this program. While the inmates are at high risk of contracting Hepatitis B, the Health Department and State Immunization Program opted to vaccinate the inmates with a combination Hepatitis A and B vaccine, 3 dose series.

The Health Department utilized the creative media abilities of summer students from Edgewood College to produce an education video informing inmates of the different types of Hepatitis and how the offered vaccine will protect them. The video is well received by the inmates and generates many appropriate questions that are answered prior to them making a decision about getting the vaccine. Vaccine clinics have been held the fourth Friday morning of every month throughout 2012 with a very positive response from the inmates.

In 2012, the combination vaccine for Tetanus, Diphtheria and Pertussis (Tdap) was offered due to the Pertussis (Whooping Cough) outbreak across Wisconsin. A limited number of Influenza vaccine doses were available as well for administration at the jail. In 2012 inmates received a total of 246 immunizations including 121 Twinrix (Hepatitis A & B), 3 Hepatitis B, 79 Tdap, 23 Influenza and 20 Hepatitis A. The Health Department hopes to sustain this remarkable response rate from the inmates in 2013.



## Social Media – “Like Us on Facebook”



The Health Department Facebook site can be found at: <https://www.facebook.com/JeffersonCountyHealth>. The Facebook page is updated by Public Health Nurse, Amy Fairfield, on relevant Public Health topics. This page has been used for disseminating information to the public during disasters or outbreaks, such as during the Pertussis outbreak.

## Check Out Our Website!

The Health Department Website is frequently updated with information about programs and services, emerging information needed during outbreaks and disasters, as well as generalized Public Health information. The Jefferson County Health Department Website can be found at: [www.jeffersoncountywi.gov](http://www.jeffersoncountywi.gov).



# WALHDAB – Today's Public Health Leaders



Jefferson County Health Department belongs to the Wisconsin Association of Local Health Departments and Boards (WALHDAB). This state-wide organization represents the Directors/Health Officers and Board of Health members in the five Public Health regions with Jefferson County in the Southern Region. The Director/Health Officers and Board of Health members attend monthly meetings that include Public Health Preparedness information as well as educational programs, agency sharing and updates from the State Department of Health Services, Division of Public Health. WALHDAB is committed to providing a forum for education and support for local Public Health Departments. Pictured above are Southern Region WALHDAB members including Gail Scott, Director/Health Officer.

## Public Health Clinical Site Developing Tomorrow's Workforce

The Health Department is dedicated to developing the Public Health workforce for the future by providing a variety of clinical experiences for students from various schools such as Edgewood College, Viterbo University, UW-Madison & UW-Green Bay Schools of Nursing for students earning their Bachelor's Degree in Nursing (BSN), Registered Nurse to Bachelor's Degree (RN to BSN) as well as students earning their Master's or Doctorate degree. The Health Department has also hosted Wisconsin Area Health Education Centers (AHEC) interns.




Students are encouraged to take an active part in their learning and to develop critical thinking and problem solving skills. They participate in group education sessions, learn about many community resources, develop a project, attend meetings and provide services to individuals and families.

*"I attended the UW-Madison School of Nursing event in which the students described their projects from their clinical sites. I was pleased to hear how much they learned from you and how you inspired them to consider work in Public Health."*

*This is an excellent example of your work to prepare the next generation of Public Health Nurses."*

**Yvonne Eide**  
Division of Public Health

# 2012 Public Health Consolidated Contract Grant Report

Objective	2012 End of Year Report
<b>Childhood Lead Poisoning Prevention Program</b>	
<p><b><i>By December 31, 2012, 400 children at risk for lead poisoning who reside in Jefferson County will receive an age-appropriate blood lead test.</i></b></p> 	<p>From January 2012 through December 2012 a total of 753 children received an age-appropriate blood lead test with 9 children identified in need of follow-up due to elevated results. These children were referred for further testing and/or an environmental assessment depending on the results. They also received case management by a Public Health Nurse. The Health Department worked with a PhD candidate on an Early Childhood Lead Screening project. Please see separate report on the project.</p>
<b>Immunization Program</b>	
<p><b><i>By December 31, 2012, 70% of children residing in Jefferson County Health Department jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccinations by their second birthday.</i></b></p>	<p>A total of 74% of children residing in Jefferson County's jurisdiction who turned 24 months of age during the contract year completed 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccinations by their second birthday.</p> 
<b>Maternal &amp; Child Health Program</b>	
<p><b><i>By December 31, 2012, The Keeping Kids Alive Initiative will be implemented by the Jefferson County Health Department in collaboration with community partners.</i></b></p>	<p>Jefferson County Health Department implemented a Child Death Review Team (CDRT) in 2012. Key stakeholders actively participated in meetings. Please see separate report on the CDRT.</p> 

## Wisconsin Well Woman Program

***By December 31, 2012, 84 Jefferson County residents ages 35-64 years will be screened through the Wisconsin Well Woman Program.***



The Jefferson County Health Department has been a local coordinating agency for the WWWP since 1994. Over the years, nearly 800 Jefferson County low income; uninsured or under-insured women between the ages of 35 & 64 have received breast and cervical screenings through this program.

A total of 142 Jefferson County residents ages 35-64 years were screened through the Wisconsin Well Woman Program (WWWP) in 2012.

The WWWP Coordinator:

- ❖ Sends monthly reminders to members regarding re-enrollment and continues to provide tracking and follow-up of active members.
- ❖ Updates Jefferson County "Participating Providers" of any program changes and works closely with provider staff on completion of reporting forms and resolving billing issues.
- ❖ Works with Jefferson County Public Health Nurses; WWWP Providers and the Rock River Free Clinic for new client referrals.
- ❖ Works with the Watertown Center for Women's Health on their free mammogram "Friend-to Friend" campaign and the Fort Memorial Foundation by referring women not eligible for screening mammograms under the WWWP due to age or income.

## Gatorfest

Gatorfest was held at Crawfish Junction in Milford in August 2012. Twelve hours of live music; a silent auction; t-shirt sales and a raffle were held to support the Southeastern Regional Breast Care Fund (SRBCF). The event, plus additional t-shirt sales (the Health Department sold \$676 worth), raised a total of \$8,692 for the fund. In addition, the Hubbleton Riders Snowmobile Club provided food at the event and donated \$500 from their proceeds to the SRBCF.

The SRBCF is a fund made possible through a partnership between the Wisconsin Well Woman Program (WWWP) and the Wisconsin Breast Cancer Coalition (WBCC). The fund provides financial assistance to low income, uninsured or underinsured individuals residing in Southeastern Wisconsin (including Jefferson County). Plans are already being made for Gatorfest 2013!





## Public Health Preparedness Program

**REQUIRED LOCAL HEALTH DEPARTMENT/TRIBE (Planning/Training) (1 of 5):** By July 31, 2012, Jefferson County Health Department will engage in a continuous planning and training process with local and regional partners to respond to Public Health emergencies.



FEMA

Jefferson County Health Department has updated the Public Health Emergency Operations Plan (EOP) with needed updates such as contact lists, EOC assignments and emergency protocols. Staff participated in the E-Sponder training, Special Needs Population tabletop exercise as well as being updated on the EOP. The Health Department met with Joe Cordova from the Department of Health Services and completed and scored the SNS TAR receiving a 98 out of 100.

## Public Health Preparedness Program

**REQUIRED LOCAL HEALTH DEPARTMENT/TRIBE (Exercises) (2 of 5):** By July 31, 2012, Jefferson County Health Department will participate in a preparedness exercise (tabletop, functional, or full-scale) or real event that meets the requirements set by the Centers for Disease Control and Prevention (CDC).



Jefferson County Health Department participated in a full scale SIMCOM exercise held with Jefferson County Emergency Management as well as local, regional and state emergency responders and communications. Staff were able to visit the sites of the partners and learn about emergency communications. The exercise tested emergency communications during a power outage. The exercise was successful in training the staff on the capabilities and resources available for communications during a disaster. The Health Department was able to network with area resources including ARES/RACES, Jefferson County Emergency Communications, Sheriff's Department Dispatch and WISCOM. In the next grant cycle staff will receive additional training on the PCA Portal, E-Sponder and a refresher on radio communications.

## Public Health Preparedness Program

**REQUIRED LOCAL HEALTH DEPARTMENT/TRIBE (Hazard Risk Assessment) (3 of 5):** By July 31, 2012, Jefferson County Health Department will complete a Public Health Hazard Risk Assessment.

The Public Health Hazard Risk Assessment was completed and presented at a meeting at the Dodge County EOC on June 7, 2012. Representatives from area hospitals and emergency responders discussed the Assessment and emergency response. A report on the Public Health Hazard Risk Assessment is available.



## Public Health Preparedness Program

**REQUIRED LOCAL HEALTH DEPARTMENT/TRIBE (Capabilities) (4 of 5):** By December 31, 2011, Jefferson County Health Department will complete the capabilities assessment.

The Capabilities Assessment was completed on line by December 31, 2011.

## Public Health Preparedness Program

**REQUIRED LOCAL HEALTH DEPARTMENT/TRIBE (Fiscal Reporting) (5 of 5):** By October 1, 2011, Jefferson County Health Department will provide a detailed budget of Public Health Emergency Preparedness (PHEP) dollars for the period August 1, 2011 to July 31, 2012.

A required budget template was provided to the Preparedness Program by Jefferson County Health Department that included a detailed budget for the use of PHEP funds, covering the time period of August 1, 2011 to July 31, 2012.

*"The Health Department is a great resource and partner with Emergency Management for planning and responding to an emergency."*

*Donna Haugom, Director  
Jefferson County Emergency  
Management*



# 2013 Public Health Grant Objectives

## *Childhood Lead Poisoning Prevention Program*

By December 31, 2013, 400 children at risk for lead poisoning who reside in Jefferson County will receive an age-appropriate blood lead test.

## *Immunization Program*

By December 31, 2013, 71% of children residing in Jefferson County's jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccinations by their second birthday.

## *Maternal and Child Health Program*

By December 31, 2013, the Keeping Kids Alive Initiative will be implemented by the Jefferson County Health Department in collaboration with community partners.

## *Wisconsin Well Woman Program*

By December 31, 2013, 63 Jefferson County residents ages 35-64 years will be screened through the Wisconsin Well Woman Program.

## *Public Health Preparedness Program*

During the first year of the Cooperative Agreement all agencies will complete the following contract deliverables by June 30, 2013. The deliverables are:

- ❖ Completion of the Capabilities Planning Guide (CPG) via a Division of Public Health (DPH) provided online tool.
- ❖ Completion of the CDC Strategic National Stockpile Local Technical Assistance Review (LTAR).
- ❖ Participation in a Homeland Security Exercise and Evaluation Program (HSEEP) compliant exercise or real event and posting the After Action Report to the Partner Communication and Alerting (PCA) Portal.
- ❖ Participation in a mid-year discussion with Preparedness Program staff regarding progress to close Capabilities gaps, needs, and sharing of best practices.
- ❖ As feasible, participate in Preparedness meetings, expert panels, health coalitions, and workgroups.
- ❖ Provide information as requested to meet CDC or programmatic requirements (i.e. Point of Dispensing Standards (POD), and fiscal information).
- ❖ Enter and maintain 3 to 5 emergency contacts via the PCA Portal Alerting (Everbridge) system.
- ❖ Agencies will continue to ensure staff is trained: on the use of Personal Protective Equipment (PPE), and on the National Incident Management System (NIMS) and Incident Command System (ICS) as needed.

## *Wisconsin Public Health Improvement Initiative (WPHII) Grant*

By September 30, 2013, the department will complete a self-assessment identifying strengths and weaknesses related to Public Health Accreditation Board (PHAB) standards & measures.

By September 30, 2013, the department will have developed a quality improvement plan addressing weaknesses identified in the self-assessment.

By September 30, 2013, the department will have completed at least one quality improvement project identified in the quality improvement plan.

# Evaluation of 2012 Goals

- ❖ Form a partnership with a PhD student from the University of Minnesota for completion of a research project on the effects of targeted outreach/education and incidence of lead testing. **Goal accomplished. Research project completed with further evaluation and implementation of lead program updates to occur in 2013.**
- ❖ Complete the 2012 Community Health Assessment in partnership with the Dodge-Jefferson Healthier Community Partnership, local area hospitals and the State Department of Health Services. **Goal accomplished. Community Health Assessment completed with development and implementation of a Community Health Improvement Plan to occur in 2013.**
- ❖ Fully implement the provision of the Tdap vaccine for inmates at the County Jail. **Goal accomplished. Inmates are now receiving the Tdap vaccine at the Jail.**
- ❖ Continue to fully implement a paperless office and work with the County on green initiatives. **Ongoing process that will continue in 2013.**
- ❖ Assist Rock River Free Clinic with transition to a five day a week operation with a full-time physician and clinic nurse. **Goal accomplished. Rock River Free Clinic is open 4.5 days per week, staffed by a physician supported by Fort HealthCare and a nurse supported by Rock River Free Clinic and the Health Department.**
- ❖ Update communications systems for staff including text messaging, use of tablets and wireless internet. Provide the Public Health Nurses with the ability to text message clients. **Goal accomplished. Cell phones updated to include text messaging, tablets in use and wireless internet installed in the Health Department.**
- ❖ Participate in a regional SIMCOM communications exercise with Emergency Management and update staff training on use of portable radios. **Participated in SIMCOM exercise. Training for staff ongoing.**
- ❖ Update staff on the Health Insurance Portability and Accountability Act (HIPAA). **Goal accomplished. HIPAA policies and procedures updated, Notice of Privacy Practices updated/revised and staff received training regarding HIPAA and confidentiality.**
- ❖ Evaluate the effectiveness and need for Well Child and HealthCheck Clinics including frequency, times, locations and co-location with WIC Clinics. **Ongoing evaluation that will continue into 2013. Discontinued one low-use clinic and evaluation of the impact of not offering immunizations to individuals with insurance and the Affordable Care Act will continue in 2013.**
- ❖ Continue to work on preparing for Health Department Accreditation and evaluation. **Ongoing and will continue in 2013.**
- ❖ Assist in the development of a coordinated county-wide volunteer system including development of a registry, policies and procedures and job descriptions. **Ongoing and participated with Jefferson County Emergency Management in this process.**

# Looking into the Future

## Goals for 2013 and Beyond

- ❖ Develop a Community Health Improvement Plan (CHIP) with Dodge County and the City of Watertown Health Departments with input from hospitals, medical providers, schools, legislators, community organizations and other county departments.
- ❖ Complete a formal Strategic Plan with participation by management and staff.
- ❖ Complete a Quality Improvement Project related to offering Well Child Clinics throughout the County.
- ❖ Complete a Quality Improvement Project with Jefferson County Human Services related to mutual referrals for high risk families.
- ❖ Further develop the Parenting Partnership Program and strengthen staff training and utilization of resources.
- ❖ Update all staff on the use of the Wisconsin Electronic Disease Surveillance System (WEDSS).
- ❖ Implement recommendations of the Child Death Review Team (CDRT).
- ❖ Update the Mass Clinic Plan and review the Emergency Operations Plan.
- ❖ Complete the Business Continuity of Operations Plan.
- ❖ Participate in a Regional Mass Clinic Exercise.
- ❖ Continue to update agency policies and procedures.
- ❖ Evaluate the feasibility of implementing the Early Childhood Lead Poisoning Prevention Program.
- ❖ Continue to be a Public Health clinical site for a variety of students.
- ❖ Develop an educational program for the clinic waiting area.





*"As an employee of the Jefferson County Health Department for 24 years, I have seen many changes in department programs, funding and technology. One thing that always remains constant is the outstanding dedication of the staff in serving the residents of Jefferson County. "Services for a Healthy Community" is a motto that the staff strives for with pride. I am honored to be a part of the Jefferson County Health Department team!"*

**Sandee Schunk**  
Accounting Specialist II  
Wisconsin Well Woman Coordinator

*"I have worked for Jefferson County Health Department for 32 years, 23 as Director/Health Officer. For me this is not just a job, but a profession that I truly believe in including the foundational principles of assessment, policy development, assurance, and prevention. I have been extremely lucky to work with wonderful, dedicated employees who are not only skilled at what they do but also dedicated to providing quality services to Jefferson County residents. I appreciate the support the County Board has given to the Health Department and look forward to making Jefferson County a healthier place to live, work and play!"*

**Gail Scott, RN, BSN**  
Director/Health Officer

*"For years, Head Start has partnered with the Health Department to ensure that the highest level of health services are provided to our children and their families. The Health Department is key to the success of this approach."*

**Mary Anne Wieland, Director**  
Jefferson County Head Start

*Gail,  
"You have single handedly provided me with opportunities to learn more than I ever dreamed possible in the Public Health setting. Jefferson County Health Department provides more services than I ever thought possible from one entity. This is only possible by collaboration, dedication and behind the scenes work from you and all the staff. Thank you for being my preceptor."*

**Tammy, RN to BSN student**

*"The Jefferson County Health Department is a critical ally, not only for Fort HealthCare, but for all of the people residing in Jefferson County. Their work in encouraging immunizations, in addressing environmental health issues, in reducing the impact of chronic diseases and in caring for the medically indigent is an invaluable service. The Department is an essential partner to Fort HealthCare as we all work towards making Jefferson County the healthiest community in Wisconsin and we are very pleased to partner with Gail and her staff."*

**Michael Wallace, President & CEO**  
Fort HealthCare



# Jefferson County Health Department

## *Contact Information*

<b>Community Dental Clinic</b>	<b>920-563-4372</b>
<b>Emergency Number (EMS, Fire, Police)</b>	<b>911</b>
<b>Environmental Health Consortium</b>	<b>920-262-8090</b>
<b>FAX</b>	<b>920-674-7477</b>
<b>Health Department Main Number</b>	<b>920-674-7275</b>
<b>Human Services Main Number</b>	<b>920-674-3105</b>
<b>Immunizations</b>	<b>920-674-7455</b>
<b>Personal Care Program</b>	<b>920-674-7188</b>
<b>Personal Care Program (after hours)</b>	<b>920-988-1594</b>
<b>Public Health Emergencies (after hours)</b>	<b>920-988-3381</b>
<b>Public Health Program</b>	<b>920-674-7275</b>
<b>Rock River Free Clinic</b>	<b>920-674-7442</b>
<b>WIC</b>	<b>920-674-7189</b>
<b>Wisconsin Well Woman Program</b>	<b>920-674-7193</b>
<b>Facebook: <a href="https://www.facebook.com/JeffersonCountyHealth">https://www.facebook.com/JeffersonCountyHealth</a></b>	
<b>Web Site: <a href="http://www.jeffersoncountywi.gov">www.jeffersoncountywi.gov</a></b>	
<b>E-Mail: <a href="mailto:gails@jeffersoncountywi.gov">gails@jeffersoncountywi.gov</a></b>	